

FAX TRANSMISSION

DATE: November 30, 2004

PTO IDENTIFIER: Application Number 09/588,350-Conf. #8119
Patent Number

Inventor: Kazuo Matsuyama et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (703) 872-9306

FROM: CONNOLLY BOVE LODGE & HUTZ LLP
Morris Liss

PHONE: (202) 331-7111

Attorney Dkt. #: 20162-00557-US

PAGES (Including Cover Sheet): 5

CONTENTS: Fec Transmittal (1 page)
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Notice of Appeal (1 page)
Charge \$450.00 to deposit account 22-0185
Certificate of Transmission (1 page)

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PTO/SB/97 (09-04)
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Application No. (if known): 09/588,350

Attorney Docket No.: 20162-00557-US

Certificate of Transmission under 37 CFR 1.8

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on November 30, 2004
Date



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Lisa Hawkins

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Fee Transmittal
One Month Request for Extension of Time Under 37 CFR 1.136(a)
Notice of Appeal
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PTO/SB/17 (11-04)

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**FEE TRANSMITTAL
for FY 2005**

Effective 10/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 450.00**Complete if Known**

Application Number	09/588,350-Conf. #8119
Filing Date	June 7, 2000
First Named Inventor	Kazuo Matsuyama
Examiner Name	P. E. Elisca
Art Unit	3621
Attorney Docket No.	20162-00557-US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order
☒ Deposit Account ☐ None

Deposit Account Number: 22-0185
 Deposit Account Name: Connolly Bove Lodge & Hutz LLP

The Director is authorized to: (check all that apply)

- ☒ Charge fee(s) indicated below
☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17
☒ Credit any overpayments

To the above-identified deposit account.

☐ Other (please identify):**FEE CALCULATION****1. BASIC FILING FEE**

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
Utility Filing Fee	790	395	
Design Filing Fee	350	175	
Plant Filing Fee	550	275	
Reissue Filing Fee	790	395	
Provisional Filing Fee	160	80	

Subtotal (1) \$ 0.00

FEE CALCULATION (continued)**2. EXTRA CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	18	9
Each independent claim over 3	88	44
Multiple dependent claims	300	150
For Reissues, each claim over 20 and more than in the original patent	18	9
For Reissues, each independent claim more than in the original patent	88	44

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP = X

HP= highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP = X

HP= highest number of independent claims paid for, if greater than 3

Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
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Subtotal (2) \$ 0.00

3. OTHER FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid
1-month extension of time	110	55	110.00
2-month extension of time	430	215	
3-month extension of time	980	490	
4-month extension of time	1,530	765	
5-month extension of time	2,080	1,040	
Information disclosure sum. Fee	180	180	
37 CFR 1.17(q) processing fee	50	50	
Non-English specification	130	130	
Notice of Appeal	340	170	340.00
Filing a brief in support of appeal	340	170	
Request for oral hearing	300	150	
Other:			

Subtotal (3) \$ 450.00

SUBMITTED BY

Signature

Registration No.
(Attorney/Agent)

24,510

Telephone

(202) 331-7111

Name (Print/Type)

Morris Liss

Date

November 30, 2004

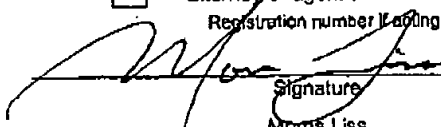
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PTO/SB/22 (10-04)

Approved for use through 7/31/2006, OMB 0661-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (fees effective on or after October 1, 2004)		Docket Number (Optional) 20162-00557-US																									
Application Number 09/588,350-Conf. #8119		Filed June 7, 2000																									
For ELECTRONIC RIGHTS INFORMATION PROCESSING SYSTEM, METHOD AND APPARATUS FOR CARRYING OUT SAME AND RECORDED MEDIUM FOR PROGRAM CARRYING OUT THE METHOD																											
Art Unit 3621		Examiner P. E. Ellisca																									
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;"></th> <th style="width: 20%; text-align: center;">Fee</th> <th style="width: 20%; text-align: center;">Small Entity Fee</th> <th style="width: 20%;"></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$110.00</td> <td style="text-align: center;">\$55.00</td> <td style="text-align: center;">\$ 110.00</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$430.00</td> <td style="text-align: center;">\$215.00</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$980.00</td> <td style="text-align: center;">\$490.00</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1,530.00</td> <td style="text-align: center;">\$765.00</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2,080.00</td> <td style="text-align: center;">\$1,040.00</td> <td style="text-align: center;">\$</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>22-0185</u>. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input type="checkbox"/> attorney or agent of record. Registration Number _____</p> <p><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number (ending under 37 CFR 1.34(a)) <u>24,510</u></p> <p style="text-align: center;"> _____ Signature Morris Liss Typed or printed name</p> <p style="text-align: right;">November 30, 2004 _____ Date (202) 331-7111 _____ Telephone Number</p> <p><small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.</small></p> <p><input type="checkbox"/> Total of <u>1</u> forms are submitted.</p>					Fee	Small Entity Fee		<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110.00	\$55.00	\$ 110.00	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430.00	\$215.00	\$	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980.00	\$490.00	\$	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,530.00	\$765.00	\$	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,080.00	\$1,040.00	\$
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